FEB 1 0 2006

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Fees Paid (\$)

290.00

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE iction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). **Application Number** 10/618,604 TRANSMIT Filing Date July 15, 2003 For FY 2005 First Named Inventor Scarth **Examiner Name** Sung H. Pak Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2874 TOTAL AMOUNT OF PAYMENT (\$) 290 00 TR-174-US Attomey Docket No METHOD OF PAYMENT (check all that apply) Check Credit Card L Money Order None Other (please identify): ✓ Deposit Account Deposit Account Number: <u>501832</u> Deposit Account Name: Tropic Networks Inc. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES EXAMINATION FEES SEARCH FEES Small Entity Small Entity Small Entity Application Type** Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 500 200 150 250 100 200 Design 100 100 50 130 65 Plant 200 150 100 -- 300 160 . . 80.... Reissue 300 150 500 600 250 300 200 Provisional 100 0 0 0 2. EXCESS CLAIM FEES Small Entity Fee (\$) Fee (\$) Fee Description 50 25 Each claim over 20 (including Reissues) 200 100 Each independent claim over 3 (including Reissues)

Lacii independent ciann over 5 (including reissues)					200	100	
Multiple dependent	claims	-			360	180	
Total Claims	Extra Claims	Fee (\$)		Fee Paid (\$)	Multiple Depe	endent Claims	
20 or HP :	= x		_= .		Fee (\$)	Fee Paid (\$)	
HP = highest number of to	tal claims paid for, if gr	eater than 20.					
Indep. Claims	Extra Claims	Fee (\$)		Fee Paid (\$)			
3 or HP =	x		_ = .				
HP = highest number of inc	dependent claims paid	for, if greater t	nan 3).			
3. APPLICATION SIZI	E FEE						
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer							

the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof., See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s),

Number of each additional 50 or fraction thereof Fee Paid (\$) Total Sheets Extra Sheets /50 = (round up to a whole number)

4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Terminal disclaimer and 2 mo extension (\$65 + \$225)

SUBMITTED BY	W ()		
Signature	HEN	Registration No. (Attorney/Agent) 44,185	Telephone (613) 270-6026
Name (Print/Type) 1/	istorio Dennollu	 -	Date Feb 07, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.